

Fill in this information to identify the case:

Debtor name Jumpstar Enterprises LLC

United States Bankruptcy Court for the:

Southern District of TexasCase number (if known): 24-35874☐ Check if this is an amended filing

## Official Form 206E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

## Part 1: List All Creditors with PRIORITY Unsecured Claims

## 1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507)

☐ No. Go to Part 2.☒ Yes. Go to line 2.

## 2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

## 2.1 Priority creditor's name and mailing address

Harris County Tax Office1001 Preston StreetHouston, TX 77002

Date or dates debt was incurred

Last 4 digits of account  
number                    Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the Claim:

Is the claim subject to offset?

☒ No☐ Yes

Total claim

Priority amount

unknownunknown

## 2.2 Priority creditor's name and mailing address

Harris County, Texasc/o Catherine Ayeni1019 Congress, 15th FloorHouston, TX 77002

Date or dates debt was incurred

Last 4 digits of account  
number                    Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is:

Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Basis for the Claim:

Unpaid Tolls

Is the claim subject to offset?

☒ No☐ Yes\$339,592.51\$339,592.51

Debtor **Jumpstar Enterprises LLC**  
 Name \_\_\_\_\_

Case number (if known) **24-35874**

**Part 1:** Additional Page

<b>2.3</b> Priority creditor's name and mailing address <u><b>Internal Revenue Service</b></u> <u><b>1919 Smith St</b></u> <u><b>Houston, TX 77002</b></u>	As of the petition filing date, the claim is: <u><b>unknown</b></u> <u><b>unknown</b></u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date or dates debt was incurred _____	Basis for the Claim: _____
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) <u><b>(8)</b></u>	

Debtor **Jumpstar Enterprises LLC**Case number (if known) **24-35874**

Name

**Part 2:** List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

**Amount of claim****3.1** Nonpriority creditor's name and mailing addressAdvantage TrailerAttn: Richard C. Vilven Jr.1619 Navarro DriveAllen, TX 75013

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

**As of the petition filing date, the claim is:***Check all that apply.*☐ Contingent☐ Unliquidated☒ Disputed**Basis for the claim:** Equipment Leases**Is the claim subject to offset?**☒ No☐ Yes\$96,000.00**3.2** Nonpriority creditor's name and mailing addressAGH Machine, Inc.Attn: Guillermo Alanis13610 Reeveston StreetHouston, TX 77039

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

**As of the petition filing date, the claim is:***Check all that apply.*☒ Contingent☒ Unliquidated☒ Disputed**Basis for the claim:** Litigation Claim(s)**Is the claim subject to offset?**☒ No☐ Yes\$0.01**3.3** Nonpriority creditor's name and mailing addressAmerican Expressc/o Registered Agents Inc.5900 Balcones DriveAustin, TX 78731

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

**As of the petition filing date, the claim is:***Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:** Credit Card**Is the claim subject to offset?**☒ No☐ Yes\$7,932.33**3.4** Nonpriority creditor's name and mailing addressGuillermo Alanis14718 Pine StreetSanta Fe, TX 77517

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

**As of the petition filing date, the claim is:***Check all that apply.*☒ Contingent☒ Unliquidated☒ Disputed**Basis for the claim:** Litigation Claim(s)**Is the claim subject to offset?**☒ No☐ Yes\$0.01

Debtor **Jumpstar Enterprises LLC**  
Name \_\_\_\_\_

Case number (if known) **24-35874**

**Part 2:** Additional Page

<p><b>3.5</b> Nonpriority creditor's name and mailing address  <u><b>Harris County Toll Road Authority</b></u>  <u><b>1019 Congress, 15th Floor</b></u>  <u><b>Houston, TX 77002</b></u></p> <p>Date or dates debt was incurred _____          Last 4 digits of account number ____ _</p>	<p>As of the petition filing date, the claim is: <u><b>\$339,592.51</b></u>  <i>Check all that apply.</i>  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Citation for Unpaid</b>          Basis for the claim: <u><b>Tolls</b></u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
<p><b>3.6</b> Nonpriority creditor's name and mailing address  <u><b>Jamal Deandre Sanders</b></u>  <u><b>c/o Gregory S. Lindley</b></u>  <u><b>2121 Sage Road, Suite 150</b></u>  <u><b>Houston, TX 77056</b></u></p> <p>Date or dates debt was incurred _____          Last 4 digits of account number ____ _</p>	<p>As of the petition filing date, the claim is: <u><b>\$0.01</b></u>  <i>Check all that apply.</i>  <input checked="" type="checkbox"/> Contingent  <input checked="" type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p><b>Citation for Unpaid</b>          Basis for the claim: <u><b>Litigation Claim(s)</b></u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
<p><b>3.7</b> Nonpriority creditor's name and mailing address  <u><b>Karen Lynn McDonald</b></u>  <u><b>c/o Joshua D. Lee, C.J. Baker</b></u>  <u><b>Armstrong Lee &amp; Baker LLP</b></u>  <u><b>2800 North Loop West, Suite 900</b></u>  <u><b>Houston, TX 77092</b></u></p> <p>Date or dates debt was incurred _____          Last 4 digits of account number ____ _</p>	<p>As of the petition filing date, the claim is: <u><b>\$0.01</b></u>  <i>Check all that apply.</i>  <input checked="" type="checkbox"/> Contingent  <input checked="" type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p><b>Citation for Unpaid</b>          Basis for the claim: <u><b>Litigation Claim(s)</b></u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
<p><b>3.8</b> Nonpriority creditor's name and mailing address  <u><b>Kenny Roswurm</b></u>  <u><b>c/o Joshua D. Lee, C.J. Baker</b></u>  <u><b>Armstrong Lee &amp; Baker LLP</b></u>  <u><b>2800 North Loop West, Suite 900</b></u>  <u><b>Houston, TX 77092</b></u></p> <p>Date or dates debt was incurred _____          Last 4 digits of account number ____ _</p>	<p>As of the petition filing date, the claim is: <u><b>\$0.01</b></u>  <i>Check all that apply.</i>  <input checked="" type="checkbox"/> Contingent  <input checked="" type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p><b>Citation for Unpaid</b>          Basis for the claim: <u><b>Litigation Claim(s)</b></u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>

Debtor **Jumpstar Enterprises LLC**  
 Name \_\_\_\_\_

Case number (if known) **24-35874**

**Part 2:** Additional Page

<p><b>3.9</b> Nonpriority creditor's name and mailing address</p> <p><u>Marcus Bennet</u></p> <p><u>c/o Brian White</u></p> <p><u>3120 Southwest Freeway, Suite 350</u></p> <p><u>Houston, TX 77098</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$0.01</u></p> <p><i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Litigation Claim(s)</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.10</b> Nonpriority creditor's name and mailing address</p> <p><u>Mediterranean Shipping Company</u></p> <p><u>Attn: Corporation Service Co.</u></p> <p><u>d/b/a CSC-Lawyers Incorporating Service Co.</u></p> <p><u>211 East 7th Street, Suite 620</u></p> <p><u>Austin, TX 78701</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$325,000.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.11</b> Nonpriority creditor's name and mailing address</p> <p><u>Mohave, Inc.</u></p> <p><u>Attn: Jeff D. Stewart</u></p> <p><u>425 Cypress</u></p> <p><u>Abilene, TX 79601</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$60,000.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Insurance Premium</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

Debtor **Jumpstar Enterprises LLC**  
NameCase number (if known) **24-35874****Part 3:** List Others to Be Notified About Unsecured Claims**4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2.** Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.**If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.**

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Guillermo Alanis</b> <b>c/o Elizabeth Bohorquez</b> <b>2401 Fountain View, Suite 801</b> <b>Houston, TX 77057</b>	Line <b>3.4</b> <input type="checkbox"/> Not listed. Explain _____	____ _
4.2	<b>Harris County Toll Road Authority</b> <b>1310 Prairie, Suite 300</b> <b>Houston, TX 77002</b>	Line <b>3.5</b> <input type="checkbox"/> Not listed. Explain _____	____ _
4.3	<b>Internal Revenue Service</b> <b>PO Box 7346</b> <b>Philadelphia, PA 19101</b>	Line <b>2.3</b> <input type="checkbox"/> Not listed. Explain _____	____ _
4.4	<b>Jamal Deandre Sanders</b> <b>c/o Bernard Bolanos</b> <b>3310 Katy Freeway, Suite 110</b> <b>Houston, TX 77007</b>	Line <b>3.6</b> <input type="checkbox"/> Not listed. Explain _____	____ _

Debtor **Jumpstar Enterprises LLC**  
Name

Case number (if known) **24-35874**

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1

5a. \$339,592.51

5b. Total claims from Part 2

5b. + \$828,524.90

5c. Total of Parts 1 and 2  
Lines 5a + 5b = 5c.

5c. 

\$1,168,117.41